

CONFIDENTIAL SUBJECT TO PROTECTIVE ORDER

General Assessment Form

Trumbull County Jail - Medical Department

Name: Wright, Gregory Date/Time: 5-5-17 12:15a
DOB: [REDACTED] Where Seen?: 2C floor

Complaint/ Subjective Data :

coming off heroine says "I'm sick"
I won't tell me anything else

Medications: xanax 20mg

Allergies: _____

Level of Consciousness: a/o x3

Pupils: _____

General Appearance: distressed

Skin Appearance: clammy

Visible Injuries/ Lesions? : _____

BP: _____ P: _____ R: _____ T: _____ SPO2% _____

Other Objective Data:

unable to obtain vitals d/t 'IM
being uncooperative

Treatment/ Plan:

IBU imodium ; maalox x18 doses

Medical Signature: [Signature]

Date: 5-5-17

1/12 CSA

Malvasi 000004

